NATIONAL SCHOOL LUNCH PROGRAM (NSLP) RESIDENTIAL CHILD CARE INSTITUTION (RCCI) ON-SITE REVIEW

According to 7 CFR 210.8(a)(1), every school year, **prior to February 1**, each Local Education Agency (LEA) with more than one site (as defined 7 CFR Part 210.2 to include RCCIs) must perform no less than one on-site review of the lunch counting and claiming system employed by each site under its jurisdiction.

Each on-site review must ensure the site's claim is based on the counting system, as implemented, and yields the actual number of reimbursable free, reduced price (if applicable), and paid (if applicable) lunches, respectively, served for each day of operation.

If the review discloses problems with a site's meal counting or claiming procedures, the LEA must ensure that the site implements corrective action, and within 45 days of the review conduct a follow-up on-site review to determine that the corrective action resolved the problems.

Site N				Review Date:		
are	answe	red '		ow by the the reviewer and site representative. If any of the questions ne current situation and the action to correct the problem under the ng.		
YES	NO					
		1.	Is the method used for counting reimbursable meals in compliance with the approved <i>point of service</i> requirement as indicated in SNEARS? (Meal counts must be taken at the location where complete meals are served to residents/day students.)			
		2.	Is the <i>point of service</i> meal count used to determine the site's claim for reimbursement?			
		3.	Is the staff member taking meal counts correctly identifying reimbursable meals at the end of the serving line?			
4. Is the site corrapplicable):				rectly implementing policies for handling the following (as		
			Yes No N/A			
				Incomplete meals? Second meals? Lost, stolen, misused, forgotten or destroyed tickets, tokens, IDs, PINs?		
				Visiting student meals? Adult and non-student meals A la carte? Student worker meals? Field Trips? Charged and/or prepaid meals? Offer vs. Serve?		

			Reviewer	Title	Date		
SIGN	NATUI	RES:	Site Representative	Title	Date		
		12.	2. Are edit check worksheets completed which compare the daily counts of free, reduced price and paid lunches against the product of the number of children currently eligible for free, reduced price and paid lunches, respectively, times an attendance factor (and any discrepancies accounted for and explained)?				
		11.	. Is a current eligibility list kept up-to-date and used by the meal count system to provide an accurate daily count of reimbursable meals by category (free, reduced price, paid)?				
		10.	Does the system prevent overt price meals?	identification of children rec	eiving free or reduced		
			NOTE: THE FOLLLOWING WITH DAY STUDEN		ONLY FOR RCCIs		
			*Paid: *Day stude	*Paid: ents only			
			Free: *Reduced price:	*Reduced p	orice:		
			Today's Meal Counts	Number of Eligible Free:	e Residents/Students		
		9.	Are internal controls (edits, monitoring, etc.) established to ensure that daily counts do not exceed the number of residents/day students eligible or in attendance and that an accurate claim for reimbursement is made? Record below today's meal counts by category and compare to the number of residents/students eligible by category.				
		8.	Are daily counts correctly total	led and recorded?			
		7.	Are there procedures for meal counting and claiming when the primary counting and claiming system is not available and do staff know when and how to implement it?				
		6.	Is someone trained as a backup for the staff member(s) taking meal counts?				
		5.	Is there a method of identifying pattern requirements, seconds, reimbursable meals?				

COMPLETE NEXT PAGE IF CORRECTIVE ACTION REQUIRED (for any "NO" answers above)

CORRECTIVE ACTION PLAN

INDICATE DETAILED CORRECTIVE ACTION THAT WILL BE TAKEN FOR ANY "NO" ANSWERS:

DATE CORRE	CCTIVE ACTION(S) WILL B	BE IMPLEMENTED:	
PERSON RESI	PONSIBLE FOR CORRECT	IVE ACTION:	
(<u>FOLI</u> must be conducted withi	<u>LOW-UP VISIT</u> n 45 days if corrective a	ction was required):
INDICATE OB	SERVATIONS OF CORREC	TIVE ACTION IMPLEMEN	NTATION:
SIGNATURE:			
	Site Representative	Title	Date
	Reviewer	Title	Date